

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)		Attorney Docket Number 23648-70614			
		First Named Inventor JOHNSON		BRIAN	
		COMPLETE IF KNOWN			
		Application Number		TO BE ASSIGNED	
		Filing Date		Group Art Unit	
Examiner Name					

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MANIKIN AND EYE DEVICE APPARATUS, METHODS AND ARTICLES OF MANUFACTURE

The specification of which

☒ is attached hereto

OR

was filed on * as United States Application Number * or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designed at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/331,316	11/14/2001	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

DECLARATION – Utility or Design Patent ApplicationDirect all correspondence to: ☐ Customer Number or ☒ Correspondence address below

Name Evelyn H. McConathy

Address Dilworth Paxson LLP

Address 3200 Mellon Bank Center, 1735 Market Street

City Philadelphia

State Pennsylvania

Zip 19103

Country USA

Telephone 215.575.7034

Fax 215.575.7200

POWER OF ATTORNEY

I hereby appoint the following practitioner(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Evelyn H. McConathy, Reg. No. 35,279

Darryl W. Shorter, Reg. No. 47,942

[X] I hereby appoint the practitioner(s) associated with Customer Number 27730 to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

[] Attached, as part of this Declaration and Power of Attorney, is the authorization of the above-named practitioner(s) to accept and follow instructions from my representative(s).

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

BRIAN

Family Name or Surname

JOHNSON

Inventor's Signature

Brian Johnson

Date

Residence/City: HAYWARD

State WI

Country USA

Citizenship USA

Mailing Address: 13250 W STATE ROAD 77

Mailing Address:

City: HAYWARD

State WI

Zip 54843

Country USA

NAME OF SECOND INVENTOR:☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Inventor's Signature

Date

Residence/City:

State

Country

Citizenship

Mailing Address:

Mailing Address:

City:

State

Zip

Country

Additional inventors are being named on the one (1) supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto